

My Name _____
Address _____
City, State, Zip _____
Phone _____
E-mail _____

I am the ☐ Plaintiff ☐ Defendant
☐ Attorney for the ☐ Plaintiff ☐ Defendant and my Utah Bar number is

JUSTICE COURT OF DAVIS COUNTY

800 West State Street, Courtroom 2

PO Box 618, Farmington, Utah 84025

Phone: 801-451-4488

Plaintiff

v.

Defendant

And

Defendant

Notice of Dismissal

Case Number _____

Judge Jerald L. Jensen

PLEASE TAKE NOTICE: ☐ Plaintiff's ☐ Defendant's claim has been dismissed because of your failure to appear at the trial. A copy of the order is enclosed. You may ask to set aside this order by filing a Motion to Set Aside with this court within 15 days after the date the judgment was entered. You may appeal this order by filing a Notice of Appeal with this court within 30 days after the date the judgment was entered.

I declare under penalty of Utah Code Section 78B-5-705 that everything stated in this document is true and correct.

Date _____ Sign here ► _____

Typed or printed name _____

Certificate of Service

I certify that I served a copy of this Notice of Dismissal on the following people.

| Person's Name | Method of Service | Served at this Address | Served on this Date |
|---------------------------|---|------------------------|---------------------|
| (Other Party or Attorney) | <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) | | |
| (Clerk of Court) | <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Electronic File | | |
| | <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) | | |
| | <input type="checkbox"/> Mail <input type="checkbox"/> Hand Delivery <input type="checkbox"/> Fax (Person agreed to service by fax.) <input type="checkbox"/> Email (Person agreed to service by email.) <input type="checkbox"/> Left at business (With person in charge or in receptacle for deliveries.) <input type="checkbox"/> Left at home (With person of suitable age and discretion residing there.) | | |

Date _____ Sign here ► _____

Typed or printed name _____